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Bib Data Sheet

CONFIRMATION NO. 9137

|  |   |                               |   |                                      |
|--|---|-------------------------------|---|--------------------------------------|
| <b>SERIAL NUMBER</b><br>10/532,956   | <b>FILING OR 371(c) DATE</b><br>04/27/2005<br><b>RULE</b>   | <b>CLASS</b><br>514           | <b>GROUP ART UNIT</b><br>1614   | <b>ATTORNEY DOCKET NO.</b><br>P51376 |
| <b>APPLICANTS</b><br>Jakob Busch-Petersen, King of Prussia, PA;<br>Michael R Palovich, Collegeville, PA;<br>Katherine L Widdowson, King of Prussia, PA;  |   |                               |   |                                      |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/US03/33964 10/28/2003<br>which claims benefit of 60/421,956 10/29/2002   |   |                               |   |                                      |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |                                      |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance <i>FB</i><br>Verified and Acknowledged<br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR COUNTRY</b><br>PA | <b>SHEETS DRAWING</b>   | <b>TOTAL CLAIMS</b><br>4             |
| <b>INDEPENDENT CLAIMS</b><br>1   |   |                               |   |                                      |
| <b>ADDRESS</b><br>20462  |   |                               |   |                                      |
| <b>TITLE</b><br>11-8 receptor antagonists  |   |                               |   |                                      |
| <b>FILING FEE RECEIVED</b><br>600  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                      |



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